

Manifestation Determination Review

Participants

The following individuals participated in this Manifestation Determination Review Meeting. Additional participants should be noted and attached to this form.

Student (when appropriate)

District Representative/Designee

Parent

General Education Teacher

Parent

Special Education Teacher/Provider

An individual who can interpret the instructional
implications of evaluation results
(MET Representative/Potential MET Member)

Other

Other

Parent Contact

Professional personnel contacted parents to arrange a mutually agreeable time and place for the IEPT meeting and to explain the purpose of the meeting and the roles of each participant.

Method of contact: _____ By _____ Date _____ Result _____

If the parent could *not* be reached to arrange a mutually agreed upon time and place, an additional contact(s) was made:

Method of contact: _____ By _____ Date _____ Result _____

Considerations for Review

Describe the behavior subject to disciplinary action:

In carrying out a Manifestation Determination Review, the IEPT must consider, in terms of the behavior subject to disciplinary action, all relevant information, including:

☐ Evaluation and diagnostic results.

*Describe: _____

☐ Relevant information supplied by the parent.

*Describe: _____

☐ Observations of the student.

*Describe: _____

☐ The student's IEP and placement.

*Describe: _____

*The IDEA 1997 requires consideration of the above information. The written descriptions are optional.

Manifestation Determination

If the determination of the IEPT is “No” **to any** of the statements below, then the behavior must be considered a manifestation of the student’s disability.

In relation to the behavior subject to discipline and the student’s disability:

- | | |
|---|--|
| 1. The current IEP and placement were appropriate; | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. The special education services, supplementary aids and services, and behavioral intervention strategies were provided consistent with the student’s IEP and placement; | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. The student understood the impact and consequences of the behavior subject to disciplinary action; | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. The student had the ability to control the behavior subject to disciplinary action. | <input type="checkbox"/> Yes <input type="checkbox"/> No |

The determination of the IEPT is that behavior subject to discipline is:

- ☐ not a manifestation of the disability; records are transferred to general education for disciplinary procedures.
☐ a manifestation of the disability.

Parent signature

- ☐ I received notice of procedural safeguards on the day on which the decision to take disciplinary action involving a change in placement was made.
☐ I agree with the determination above.
☐ I disagree with the determination above and request an expedited hearing.

Parent Signature _____ Date _____